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PUBLIC HEALTH REPORTS

VOL. 29.

SEPTEMBER 25, 1914.

No. 39

PLAGUE-ERADICATIVE WORK.

Detailed statements of plague-eradicative work being carried on in the United States and insular possessions will be found on pages 2526 to 2530 of this issue of the Public Health Reports.

Later telegraphic advices from New Orleans state that 3 additional human cases have been notified and 36 additional plague-infected rats have been found, making the total number of human cases notified since the beginning of the outbreak 28, and the number of plague rats found 128.

MORBIDITY REPORTS.

METHOD OF SECURING AND RECORDING IN CALIFORNIA.

[From the California State Department of Health.]

California requires a weekly report of cases of communicable disease from the 290 health officers in the State, 58 of whom are county health officers, reporting for that portion of the county lying outside of incorporated cities, the remaining 232, who are city health officers, reporting for the territory lying within the corporate limits.

2-Q-9	WEEKLY REPORT OF COMMUNICABLE DISEASES. RETURN PROMPTLY TO CALIFORNIA STATE BOARD OF HEALTH SACRAMENTO.									
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Fig. 1.—Blank used for the weekly report made by city and county health officers to the State department of health.

In order to facilitate reporting, blank forms and addressed return envelopes are forwarded to the health officer at the beginning of each month, together with circular letters and printed information for the use of the health officer. Although the report blanks are forwarded monthly, a weekly report is required from the health officer. These

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report blanks are addressed by means of an addressing machine, a different-colored blank being used for each week. By using different colors of paper the work of assembling the reports by weeks is simplified.

The California laws require the reporting of 32 different communicable diseases, a misdemeanor penalty being imposed for failure to report. In case any health officer neglects to forward a weekly report a postal card calling his attention to the matter is sent to him. In nearly all cases this brings an immediate response. Most of the health

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Fig 2.—Blank for reporting communicable diseases.

officers report promptly, however, although there is a disposition on the part of those officials in the smaller cities, where cases of communicable diseases are of comparatively rare occurrence, to report monthly rather than weekly. The more serious communicable diseases, such as diphtheria, scarlet fever, smallpox, and poliomyelitis are generally reported immediately upon diagnosis, the law requiring such reports in writing within 24 hours after diagnosis. Cards bearing a list of the reportable diseases are supplied to the health officers for distribution among the physicians in their territory.

In the office of the State board of health the reports are filed by counties alphabetically, the reports for cities in each county being filed by counties alphabetically. For convenience each county and city is assigned a number. For example, Alameda County is No. 1–0, and the city of Alameda next following is No. 1–1; Berkeley, next in order, is No. 1–2, etc. This method enables the filing to be done much more quickly. For convenience, in referring to morbidity conditions throughout the State, colored signals are used which are attached to the top of the report blank. The figures from 1 to 23 are printed on the top of the report, each number referring to a certain reportable disease, different colored signals being used for each disease. By this means it is very easy to determine at a glance the exact number of cases of any of the communicable diseases that may be present in the State.

For certain diseases, in which more detailed information is desired than the weekly report blank calls for, certificates of communicable disease are forwarded to the health officer in order that the information may be supplied in a standardized form.

It has not been found practicable to use these certificates for tuberculosis, for the reason that more specific data of an altogether different sort are required in reports of tuberculosis cases than this certificate calls for.

This plan in general has been used for nearly a year and is giving good results. Considerable labor is involved in placing the signals upon the reports, but it is believed that the time is well spent, for the reason that it makes the morbidity statistics at all times instantly available. The statistics are tabulated in such a way that the morbidity records for any city in the State for any given disease are at all times available.

An occasional case of willful neglect on the part of the physician requires the health officer to refer the matter to the district attorney for prosecution.

COOPERATIVE PUBLIC HEALTH ADMINISTRATION.

AN EXPERIMENT IN SMALL COMMUNITIES.

By Earle B. Phelps, Professor of Chemistry, Hygienic Laboratory, United States Public Health Service.

INTRODUCTORY.

In all the complex machinery by which public health laws are enacted and administered that part is the most vital which comes into direct contact with the people themselves. Great advances in our knowledge of contagious diseases are being made in the scientific laboratories of the world under National, State, municipal, or private leadership. The long delayed application of the scientific method to